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ELECTRONICALLY FILED ON JUNE 25, 2007

APPLICATION NO. 09/525,510	FILING DATE 03/15/2000	FIRST NAMED INVENTOR Marcus Peinado	ATTORNEY DOCKET NO. MSFT-0135/147325.01	CONFIRMATION NO. 9494
TITLE OF INVENTION: RELEASING DECRYPTED DIGITAL CONTENT TO AN AUTHENTICATED PATH				
APPLN. TYPE nonprovisional	SMALL ENTITY no	ISSUE FEE \$1400	PREV. PAID ISSUE FEE \$0	PUBLICATION FEE \$0
		TOTAL FEE(S) DUE \$1400	DUE DATE 07/03/2007	
EXAMINER BACKER, FIRMIN		ART UNIT 3621	CLASS-SUBCLASS 705-059000	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363) <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>Woodcock Washburn LLP</u> 2 _____ 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type).
 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE MICROSOFT CORPORATION	(B) RESIDENCE: (CITY & STATE OR COUNTRY) REDMOND, WASHINGTON
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Please check the appropriate assignee category indicated below (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee <input type="checkbox"/> Advance Order - # of Copies ____	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) <input type="checkbox"/> A check in the amount of the fee(s) is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiency or credit any overpayment of the fees associated with this communication to Deposit Account No. 23-3050.
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5. Change in Entity Status (from status indicated below)
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Authorized Signature <u>Michael P. Dunnam</u>	Date <u>JUNE 25, 2007</u>
Typed or printed name <u>MICHAEL P. DUNNAM</u>	Registration No. <u>32,611</u>

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